

STEMI ALERT TRANSPORT

Desired Outcome	All patients who need and accept medical care related to a STEMI Alert are transported to an appropriate STEMI specialty care facility.
Standard	≥ 90% Patients with EMS identified STEMI Alert will be transported to appropriate specialty care facility or have documented reason for exception.
Acceptable Quality Level	Performance may not fall more than 3% for more than two consecutive months or any three months in a year.
Monitoring Method	Run Chart updated by 10th business day each month.

MEASURE DESCRIPTION

Indicator Description	This indicator measures the percentage of patients who are experiencing a STEMI event and accept care by EMS who are taken to an appropriate STEMI specialty care facility.
Question Indicator Answers	What is the percentage of patients who are experiencing a STEMI event and accept care by EMS are taken to an appropriate STEMI specialty care facility?
Patient / Customer Need	Patients who are experiencing a STEMI event need to be taken to a designated STEMI specialty care facility that will be able to provide definitive care in the most appropriate method based on the patient's condition.
Type of Measure	Intermediate Outcome
Objective	Pilot Measure: All patients who need and accept medical care related to a STEMI Alert are transported to an appropriate STEMI specialty care facility.
Data Provided By	Clinical Performance Management
Reporting Values	Percentage of patients documented as meeting STEMI alert criteria who are transported to an appropriate receiving facility.
Limitations	This indicator is limited to those patients contacted by ATCEMS outside a clinical setting.
Notes	None

Measure Calculation

Formula Description	Count of patients meeting STEMI alert criteria who are transported to a STEMI receiving facility or have a documented reason for exception, divided by the count of all patients meeting STEMI alert criteria. The resulting measure is expressed as a percentage.
Indicator Formula	$\text{Percentage} = \frac{\text{count}([\text{patients transported to STEMI center}])}{\text{count}([\text{patients meeting STEMI Alert criteria}])}$
Data Filters	Include only patients identified in ePCR data as meeting STEMI alert criteria Exclude patients who are not transported to a receiving facility.
Interval Calculation	Not Applicable
Numerator	<p>Population Count of patients who meet STEMI alert criteria and meet one of the following:</p> <ul style="list-style-type: none">• Transported to an approved receiving facility, OR• Personnel have documented a reason for exception to transport to an approved receiving facility <p>Inclusion See “Population”</p> <p>Exclusion Patients meeting STEMI alert criteria who are not transported to a receiving facility. Patients with an incident problem type of “Emergency Transfer” or “Attended Patient.” Patients transported to another facility per physician orders.</p> <p>Data Source Clinical Performance Management performance report.</p>
Denominator	<p>Population Count of patients meeting STEMI alert criteria who are transported to a receiving facility.</p> <p>Inclusion See above.</p> <p>Exclusion Patients meeting STEMI alert criteria who are not transported to a receiving facility. Patients with an incident problem type of “Emergency Transfer” or “Attended Patient.” Patients transported to another facility per physician orders.</p>

<i>Data Source</i>	Clinical Performance Management performance report.
Aggregation	Aggregate incidents by month based on date/time of phone pickup in Communications.
Stratification	None
Minimum Sample Size	None
Data Lineage	Patients meeting STEMI Alert criteria are queried from ATCEMS ePCR data. Charts of patients who are not transported to an approved STEMI receiving facility are retrieved and reviewed to identify those meeting exclusion criteria.

Reporting

Travis County ILA Reporting	<p>Medium: Web site chart</p> <p>Orientation: External</p> <p>Format: Run chart containing monthly data values for most recent 13 month period.</p> <p>Update Frequency: Monthly</p> <p>Data Source: Clinical Performance Management performance report.</p>
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Metadata

Pillar / Strategic Objective Links	<p>S2: To have a service delivery model that best serves the needs of our community.</p> <p>S3: To be an organization that puts service before self.</p> <p>F2: To be an organization that provides value to the community.</p> <p>F3: To provide quality cost efficient service to the community.</p>
Development Status	New indicator.
References	<p><i>Interlocal Agreement Between the City of Austin and Travis County for Emergency Medical Services (Fiscal Year 2014)</i></p> <p>Hsieh A, "Send Your Patient to the Right Facility." EMS1.com. Available at http://www.ems1.com/cardiac-care/articles/909712-Send-your-patient-to-the-right-facility/</p>

Best Practices

None referenced

Definition Version Info

Version C; 2014-03-06